FINANCIAL DISCLOSURE STATEMENT

Received
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		(For use by Local	Public Officers of the City/Town of	SURPRISE)	
Date		1/8/2014	For	Calendar Year 2013	
		/ /			
				(Or other applicable period, pl	ease specify)
1.	GEN	ERAL INFORMATION			
	whic	n you and members of you	and the name of each member of your household did business. Include ner a business is controlled or depe	controlled and dependent bus	nes under linesses (see
	(a)	Name of Local Public O	fficer LEO MA	NKIEWICZ	
			6 WEST MAU!		
	(b)		fficer's Spouse <u>JoAnna</u>		lankieu
	(c)		LEO + JOAN		7
TO TINNE					
	(d)	Names under which you and (c) above) did busin	, your spouse and members of you less.	r household (those persons lis	ted in (a), (b)
		c Officer or Household	Business Name	Business Address	Controlled and/or Dependent Business
L	=0/	MANKIEWICZ	LEO MANKIEWICE	SAME AS	C
So	10	Proprietor		RESIDENCE	-
LEC	7	JOANNA	CALEM203 LIC	1/	C
		FARN	UM HOUSE LIC	ul	C
	22-411-7777				•
				-	-
				Y	-
					-

2. SOURCES OF COMPENSATION

List names and addresses of all employers and all other sources of compensation in excess of \$1,000 received during the preceding calendar year by you, your spouse or members of your household (those persons listed in 1 (a), (b) and (c) above), or received by any other person for the use or benefit of you, your spouse or members of your household. Also, describe the nature of each employer's business and the services for which compensation was received.

You Need Not List:

Income to a business listed in 1 (d), specifically those individual sources of compensation that constituted a portion of the gross income of the business from which you or members of your household derived compensation.

Local Public Officer or Member of Household

Description of Employer's Name & Address of Employer or Other Source of Compensation over \$1,000

Business and Individual's Services for Which Compensation Was Received

LEO MANKIEWICZ	Esquire Deposition	court reporting
	3800 N. Central Phoenix	court reporting Services
	Golkow Technologies*	
165	Market St. Philadelphia	PA
LEO + JOANNA	185 Farnum St.	Rental Income
MANKIEWICZ	San Francis co CA	•
	(Rental Property)	
LEO MANKIEWICZ	City of Surprise 00 Civic Center Plaza Surprise AZ	Councilman
160	00 Civic Center Plaza	
	Surprise AZ	

3. INFORMATION ON CONTROLLED BUSINESS

* Agencies In Columns (1) and (2) give the name of any controlled business and describe the goods or services provided by the business.

If a single source of compensation to the controlled business amounts to more than \$10,000 and 25 percent of the gross income of the business, indicate the nature of the goods and services provided to the customer or client and a description of the business activities if that customer or client is a business in Columns (3) and (4). If there is no such major client or customer, leave Columns (3) and (4) blank.

You Need Not List:

The identity of any customer or client.

The amount of income from any customer or client.

The activities of any customer or client which is not a business.

(1)	(2)	(3)	(4)		
Name of Controlled Business (from Item 1 (d))	Goods or Services Provided by the Business	Goods or Services Provided to the Major Customer or Client (more than \$10,000 and 25% of Gross)	Business Activity of the Major Customer or Client, if a Business		
LED MANKIEW.	a Court				
	REPORTING				
CALEM 203 LLC	7 Residential				
FARNUM HOUSE LL	c J <u>Rental</u>	_			
(Use additional sheet if there is more than one such major customer or client of a controlled business.)					
4. INFORMATION ON DEPENDENT BUSINESS A "dependent business" is so-called because over half of its income is dependent on one major custom client. A dependent business may also be a controlled business if the public officer or members of his household also own more than a fifty percent interest in the business. If a dependent business is listed controlled business under Item 3, it need not be listed in this item.					
					Describe the goods or services provided by the business, the goods or services provided to the or client and the business activity if the major customer or client is a business.
You Need Not List:	You Need Not List:				
The identity of any customer or client. The amount of income from any customer or client. The activities of any customer or client which is not a business.			¥		

(2)

Goods or Services

(Use additional sheet if there is more than one such major customer or client of a dependent business.)

Provided by the

Business

(3)

Goods or Services Provided to the

Major Customer or

Client (more than

\$10,000 and 50%

of Gross)

(4)

of the Major

Customer or

Client, if a

Business

Business Activity

(1)

Name of Dependent

Business (from

Item 1 (d))

OWNERSHIP/BENEFICIAL INTEREST IN BUSINESS OR TRUST; INVESTMENTS 5A.

Name and Address

of Business or

List the names and addresses of all businesses <u>and trusts</u> in which you or members of your household had an ownership or beneficial interest of over \$1,000 at any time during the preceding calendar year, together with a description of the interest and value of the equity interest by category number. You should list stocks, partnerships, joint ventures, sole proprietorships and other equity interests. Also, list beneficial interests in trusts.

Value of

of Business or Trust	Local Public Officer or Member of Household	Description of Interest	Equity by Category #
Mankieurcz Trust 13956 W. Maui In Sur		Tristees	3
ARNUMHOUSE LIC 13956 W. Mauiln Su	LE 0+ JoAma	Manzging	3
	LES+JOANNZ	Mean pers	3
List the names and address any office or had a fiduciary description of the office or r Regardless of any financial	RELATIONSHIPS IN BUSINESS (sees of all businesses and trusts in way relationship at any time during the relationship. interest, you should list all businest, treasurer, secretary or trustee, et Local Public Officer or Member of Household	which you or any member of e preceding calendar year, to	ogether with a or any member of f "Business".)
Mankiewicz Tru 13956 W. Mau: Ln	st LEO+JOAN Surprise	na Troist	ees
FARNUM HOUSE 1 13956 W. Manils	LE LES + Joh	Anna Mana Mem	ging bers
CALEMZO3 LIC 13956 W. Maui L	LEON JA		
· John William L	-coprise		

6. REAL PROPERTY OWNERSHIP IN CITY/TOWN OF SURPRISE List all real property interests and real property improvements located in the City/Town of __, including location and approximate size in which you, any member of your household or a controlled or dependent business held legal title or a beneficial interest at any time during the preceding calendar year, and the value, by category, of the equity in any such property. If you or any member of your household or a controlled or dependent business acquired or divested any such interest during the preceding calendar year, disclose the transaction made and date that it occurred. If the controlled or dependent business is in the business of dealing in real property or improvements, disclosure need not include individual parcels or transactions, but the aggregate value of all such parcels. You Need Not List: Your primary residence. Property used for personal recreation by you. Individual parcels and transactions, if a controlled or dependent business is a dealer in real property.* Date Location and Local Public Officer or Value of Acquired Approximate Size Member of Household or Equity by of Realty in City/Town Business from Items 3 or 4 Category #Divested *Business dealers in real property---state only name of controlled or dependent business and aggregate value of equity interests, by category number, of all parcels held during the year. Aggregate Value Name of Controlled or Dependent of Equity Interests Business Dealer in Real Property by Category

7. DEBTS; EXCEPTIONS

List mames and addresses of creditors for all debts in excess of \$1,000 owed by you or members of your household either in your own names or in the names of any other persons at any time during the preceding calendar year.

List names and addresses of creditors to whom a controlled or dependent business owed a debt of more than \$10,000 which was also more than 30 percent of the total business indebtedness at any time during the preceding calendar year.

If the debt was incurred or discharged during the year, list whether it was incurred or discharged and the date.

You Need Not List:

Debts resulting from the ordinary conduct of a business <u>other than</u> a controlled or dependent business.

Credit card transactions.

Debts on residences or recreational property exempt from disclosure.

Retail installment contracts.

Debts on motor vehicles not used for commercial purposes.

Debts secured by cash values on life insurance.

Debts owed to relatives.

Any amounts.

PERSONAL DEBTS OVER \$1,000

Name and Address of Creditor (or Person to Whom Payments Are Made)	Date Local Public Officer or Member of Household Owing the Debt	Incurred and/or Discharged
NYCB Mortgage 801 E. 9th St. Cleveland Destert Schools FCU		2012 - incurred
16772 W. Bell Ra.	Wankjewicz USINESS DEBTS OVER \$10,000 AND	2013 - incurred + Paid of.
Name and Address of Creditor (or Person to Whom Payments Are Made)	Date Local Public Officer or Member of Household Owing the Debt	Incurred and/or Discharged
8 DEBTORS	-	

List the name of the debtor for each debt in excess of \$1,000 owed at any time during the preceding calendar year to you and members of your household or to any other person for the use or benefit of the aforementioned persons.

List the name of the debtor for each debt exceeding \$10,000 owed to a controlled or dependent business which was also more than 30 percent of the total indebtedness to the business at any time during the preceding calendar year.

Give the amount of each debt by category number.

If the debt was incurred or discharged during the year, list whether it was incurred or discharged and the date.

You Need Not List:

Those debts owed to you or members of your household resulting from the ordinary conduct of a business other than a controlled or dependent business.

DEB	TS OVER \$1,000 OWED TO YOU PERSO	ONALLY	
Name of Debtor	Local Public Officer or Member of Household to Whom Debt is Owned	Amount by Category #	Date Incurred and/or Discharged
	OVER \$10,000 AND 30% OWED TO YOU	R BUSINESS	
	Name of Controlled or Dependent Business to		Date Incurred
Name of Debtor	Whom the Debt is Owed (Business from Item 3 or 4)	Amount by Category #	and/or Discharged
		_	
	/		
	_/		
/			
O CIETS			

9. GIFTS

List each source of any gift or accumulated gifts in excess of \$500 in value received during the preceding calendar year by you, members of your household or by any other person for the use or benefit of the aforementioned persons.

You Need Not List:

Gifts received by will.

Gifts received by intestate succession.

Gifts received from intervivos (living) trusts established by a spouse or ancestor.

Gifts received from testamentary trusts established by a spouse or ancestor.

Gifts received from any other member of the household or relatives to the second degree of consanguinity. (Parents, grandparents, siblings, children and grandchildren of the recipient.)

Political campaign contributions if publicly reported as political campaign contributions.

Amounts.

Name of Donor of Gifts over \$500			Local Public Officer or Member of HouseholdRecipient	
				-
10. BUSINESS	LICENSES			
which require of the <u>City</u>	ess licenses issued, by the Cites for its issuance the consider of Surprise, to, held by time during the preceding care.	ration of the application for s by or in which you or any m	r by any other governr such license by the <u>si</u> nember of your housel	ırprise council
		Local Public Officer		
	Name in Which	or Member of Household Holding		
Type of	License is	Interest, if Not	Type of	Location of
License	Issued	Issued in Own Name	Business	Business
Rostal	Farnum House LL		Rental	13956 W M
es destral	Tarmon Flouse Da	JOAnna		SUNDASE
e side with		JOHANA	house	- (Surprise
Zental	CALEM203 LLC	Leo+	Routal	
esidential		JoAnna	house	1
				/
11. LOCAL GOV	ERNMENT BONDS			
authority of s any time duri	s, together with their value, iss such city or town or any nonpro ing the preceding calendar yea had a value in excess of \$1,00	fit corporation organized or or by you or any member of	authorized by such ci	strial development ity or town held at n bonds issued by a
If the bonds v	were acquired or divested duri	ng the year, list whether the	y were acquired or div	vested and the
				Date
Bonds Over		Local Public Officer or	Value by	Acquired and/or
\$1,000 Issuing Agency		Member of Household		# Divested
		-		
				47
	/			State Statutes

VERIFICATION

I do solemnly swear that the foregoing Financial Disclosure Statement filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to Resolution No. State Statutes.				
	Likefur			
Signature of Affiant				
SUBSCRIBED and sworn to before me by 10 May this day of, 20.4	cicwicz			
Notary Public	Anda Bio Car-Studies			
Notary Public				
My Commission Expires:				
Jeb. 7, 2016				
	OFFICIAL SEAL LINDA BROYLES-STEVENS Notary Public - State of Arizona MARICOPA COUNTY My Comm. Expires Feb. 7, 2016			